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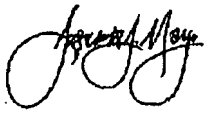
From: JOSEPH J. MAYO (REG. NO. 53,288)
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Total Number of Pages Including Cover: **3**
Date: Friday, August 31, 2007

US Serial No.: 09/719,136
Ref. No.: 1075-P0005

Comments:

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office at FAX number 571-273-8300 on Friday, August 31, 2007.

Fax Coversheet (1 page) (this sheet) Letter regarding new attorney and request for PAIR entry (1 page) Revocation of Power of Attorney and New Power of Attorney and Change of Address (1 page)	 Signature: _____ Joseph J. Mayo Date: Friday, August 31, 2007

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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App. No.	:	09/719,136
Applicant	:	JAMES
Filed	:	12/07/2000
TC/A.U.	:	1722
Examiner	:	LUK
Docket	:	1075-P0005
Customer No.	:	36067
Conf. No.	:	5715

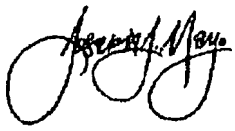
Commissioner for Patents
571-273-8300

REQUEST FOR CHANGE OF POWER OF ATTORNEY AND ENTRY OF APPLICATION INTO PAIR

Sir:

Please find the attached revocation of power of attorney with new power of attorney and change of correspondence address form attached herewith. Please associate this application in PAIR with customer number **36067** as per the attached form endorsed by the inventor.

Respectfully submitted,



Joseph J. Mayo, Reg. No.: 53,288
Ph: (858) 442-5877
Fax. (858) 777-5425

Correspondence Info:	*CERTIFICATE OF MAILING or TRANSMISSION*
Customer Number **36067**	*I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on August 31, 2007 to 571-273-8300 or is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.*
	Signature /JJM53288/ *Date: August 31, 2007* Name: Joseph J. Mayo

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PTO/SB/82 (01-06)
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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	09/719,138
Filing Date	12/7/2000
First Named Inventor	JAMES
Art Unit	1722
Examiner Name	LUK
Attorney Docket Number	1075-P0005

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☑ I hereby appoint the practitioners associated with the Customer Number: 36067

☑ Please change the correspondence address for the above-identified application to:

☑ The address associated with Customer Number: 36067

OR

☐ Firm or Individual Name					
Address					
City		State		Zip	
Country					
Telephone		Email			

I am the:

☑ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Malcolm Barry JAMES		
Date	30th AUGUST 2007	Telephone	+61 8 83373875

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: **Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**

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